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**F A X C O V E R**

**Date:** May 20, 2002 **Number of pages (including cover):** 10  
**To:** Examiner Jamroz  
**Applicant:** Krause et al.  
**Serial No:** 09/825,144  
**Filing Date:** April 3, 2001  
**Title:** METHODS FOR ALTERING T CELL AND MACROPHAGE ACTIVATION  
**Fax Number:** 703-872-9306  
**Number of Pages (including Cover Sheet):** 10

ORIGINAL DOCUMENTS SENT: ☐ 1st Class Mail ☐ Overnight Mail ☐ Air Mail ☒ Not Sent

**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that a Response to Restriction, 2nd Preliminary Amendment, & Petition for Four Month Extension in the above-referenced application (Total of 10 pages including cover sheet) is/are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Monica E. Zombori

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Date: May 20, 2002

Signing Certification

*Mzombori*

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**WG&S File Number:** M00656/70065

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Attorney's Docket No: M00656/70065 (JRV)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Krause et al.  
Serial No. : 09/825,144  
Conf. No. : 1823  
Filed : April 3, 2001  
For : METHODS FOR ALTERING T CELL AND MACROPHAGE  
ACTIVATION  
Examiner : M. Jamroz  
Art Unit : 1644

CERTIFICATE OF FACSIMILE TRANSMISSION 37 C.F.R. §1.8(a)

The undersigned hereby certifies that this document is being facsimile transmitted to the United States Patent and Trademark Office in accordance with 37 C.F.R. §1.6(d) to the attention of Examiner M. Jamroz, Technology Center 1600, Patent and Trademark Office, Washington, D.C. 20231. FAX number 703-872-9306, on the 20th day of May 2002.

  
Monica E. Zombori

Commissioner for Patents  
Washington, D.C. 20231

Sir:

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Transmitted herewith are the following documents:

☒ Response to Restriction  
☒ Second Preliminary Amendment  
☒ Petition for Four Month Extension of Time

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617)720-3500, Boston, Massachusetts.

No check is enclosed. Please charge small entity extension fee of \$720.00 to the account of the undersigned, Deposit Account No. 23/2825. Please charge any deficiency or credit overpayment to same. A duplicate of this sheet is enclosed.

Respectfully submitted

By:

  
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Docket No. M00656/70065  
Dated: May 20, 2002  
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